2. [ ] Check Enclosed									Complete if Known					
Examiner									Application No. 09/386,646					
Examiner	EEE TDANGMITTAL GÜEET							Filing	Date	•	August 31, 1999			
Examiner									amed In	ventor	Pierre	ierre C. Fazan		
Examiner	01 (6)								Group Art Unit			2811		
Atty. Docket Number   500055.02 (440073.488D1)	1 1 2002								ner					
1.   X    The Commissioner is hereby authorized to charge any additional fee required under 37 C.F.R. §5, 1-6 and 1.17 and 1.136(a)(3) and credit any over payments to Deposit Account No.: 50-1266: Deposit Account Name: DORSEY 8 WHITNEY LLP	APR								Attv. Docket Number			500055 02 (440073 48801)		
Large Entity   Small Entity   Small Entity   Small Entity   Fee   Fee   Fee   Fee   Code   (4)   Code   (5)   Code   (6)   Code   (7)   Code   (8)   Fee Description   Fee Code   (8)   Fee Description   Fee Code   (8)   Fee Description   Fee Code   (8)   Fee Description   Code   (8)   Surchage - Late filing fee or cover sheet   Code   (8)   Surchage - Late filing fee or cover sheet   Code   Co	METHOD OF PAYMENT (Check One)								000000.02 (440070.40001)					
Large Entity   Small Entity   Small Entity   Small Entity   Fee   Fee   Fee   Fee   Code   (4)   Code   (5)   Code   (6)   Code   (7)   Code   (8)   Fee Description   Fee Code   (8)   Fee Description   Fee Code   (8)   Fee Description   Fee Code   (8)   Fee Description   Code   (8)   Surchage - Late filing fee or cover sheet   Code   (8)   Surchage - Late filing fee or cover sheet   Code   Co									2 ADDITIONAL EEES					
1.136(a)(3) and credit any over payments to Deposit Account Non: <u>50-1266</u> : Deposit Account Name: <u>DORSEY &amp; WHITNEY LLP</u>   2. [ ] Check Enclosed														
2.	1.136(a)(3) and credit any over payments to Deposit Account								Fee	1			Fee paid	
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1. BASIC FILING FEE   Large Entity   Small Entity	2. Check Enclosed										Ì	•		
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Large Entity   Small Entity   Fee   Fee   Fee   Fee   Fee   Fee   Fee   Fee   Gode   (\$)   Code   (\$)   Cod												<b>.</b>	\$	
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101	11		1		-001	Description		II .		- 0		, , , ,	\$	
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106   330   206   165   Design Filing Fee   118   1,440   218   720   Extension for reply within 4th month   108   740   208   370   Reissue Filing Fee   128   1,980   280   980   Extension for reply within 5th month   128   1,980   280   980   Extension for reply within 5th month   128   1,980   280   980   Extension for reply within 5th month   128   1,980   280   980   Extension for reply within 5th month   128   1,980   280   980   Extension for reply within 5th month   128   1,980   280   140   Request for oral hearing   129   320   220   140   Request for oral hearing   148   110   248   55   Terminal Disclaimer Fee   140   110   240   55   Petition to revive – unavoidable   141   1,280   241   640   Petition to revive – unintentional   141   1,280   242   640   Utility/Reissue issue fee (+ advance copies)   143   460   243   230   Design issue fee (+ advance copies)   143   460   243   230   Design issue fee (+ advance copies)   143   460   243   230   Design issue fee (+ advance copies)   143   140	101	/40	201	3	1 U	tility Filing Fe	ee		-		]	· ·	<u> </u>	
108	106	330	206	1	65 [] D	esign Filing I	Fee	14"					\$	
114	108	740	208	3	70 [] R	eissue Filina	Fee						\$	
114   160   214   80   Provisional Filing Fee   121   280   270   140   Request for oral hearing   148   110   248   55   Terminal Disclaimer Fee   140   110   248   55   Terminal Disclaimer Fee   140   110   248   241   248   241   248   241   248	444	400				_		120		220	}		\$	
2. EXTRA CLAIM FEES  Current Claims	114	14 160 214 80 [] Provisional Filing Fee					ing Fee	121	280	270	140		\$	
Current Claims	Subtotal (1) \$ <u>-0-</u>								110	248	55	Terminal Disclaimer Fee	\$	
Total 15 - 20 = -0- x \$ 18 = \$ -0-   142   1,280   242   640   Utility/Reissue issue fee (+ advance copies)	2. EXTRA CLAIM FEES								110	240	55	Petition to revive – unavoidable	\$	
Ind. 6 - 6 = -0- x \$84 = \$-0-    IMultiple Dependent Claims	Current Claims Prior Extra Fee Fee Paid							141	1,280	241	640		\$	
IMultiple Dependent Claims   x	-	<del></del>						142	1,280	242	640		\$	
Subtotal (2) \$ -0-   123   50   123   50   Petitions related to provisional applications    Large Entity   Small Entity   126   180   126   180   Submission of IDS    Fee   Code   (5)   Fee   Code   (5)   Fee   Description   581   40   81   40   Petitions related to provisional applications    Recording each patent assignment per property (times number of properties)   179   740   279   370   Request for Continued Examination (RCE)    104   280   204   140   Multiple dependent claims over original patent   Peissue claims in excess of 20 and   Petitions to the Commissioner    Petitions related to provisional applications    Recording each patent assignment per property (times number of properties)    179   740   279   370   Request for Continued Examination (RCE)    Other fee (specify)   Subtotal (3)    Subtotal (3)   Subtotal (3)    Subtotal (3)   Petitions related to provisional applications    Petitions								143	460	243	230	Design issue fee (+ advance copies)	\$	
Large Entity Small Entity   126   180   126   180   Submission of IDS	<del></del>								130	122	130		\$	
Fee Code (\$) Fee Code (\$) Fee Description  103 18 203 9 Claims in excess of 20  102 84 202 42 Independent claims in excess of 3  104 280 204 140 Multiple dependent Claim  109 80 209 40 Reissue independent claims over original patent  Recording each patent assignment per property (times number of properties)  179 740 279 370 Request for Continued Examination (RCE)  Other fee (specify)  Subtotal (3)	Subtotal (2) <u>\$-0-</u>								50	123	50		\$	
Code (§) Code (§) Fee Description  103 18 203 9 Claims in excess of 20  102 84 202 42 Independent claims in excess of 3  104 280 204 140 Multiple dependent Claim  109 80 209 40 Reissue independent claims over original patent  Reissue independent Claim  Reissue independent Claims over original patent  Reissue daims in excess of 30 and	Large Entity Small Entity							126	180	126	180		\$	
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Reissue claims in excess of 20 and		ì	209		Reissue in					Subtotal (3)	\$ -0-			
	110	18 210 Reissue claims in excess of 20 and						Total Amount of Payment:\$ -						
Submitted by:	Submitte	ed by:												

Name: Dale C. Barr Reg. No.: 40,498 Telephone: (206) 903-8800 Signature: Date: